

## RESPONSE TO LETTER TO THE EDITOR

**Open liver resection for colorectal metastases: better short- and long-term outcomes in patients potentially suitable for laparoscopic liver resection**Fenella Welsh<sup>1</sup>, Paris P. Tekkis<sup>2</sup>, Tim G. John<sup>1</sup> & Myrddin Rees<sup>1</sup><sup>1</sup>Hepatobiliary Unit, North Hampshire Hospital, Basingstoke, and <sup>2</sup>Department of Colorectal Surgery, The Royal Marsden Hospital, London, UK

We thank Kazaryan and colleagues for their interest in our recent paper. They highlighted the use of our Basingstoke Predictive Index (BPI) and stated that their patient who underwent a laparoscopic liver resection had improved survival in their hands versus their expected survival from the BPI. This highlights our message that case selection for laparoscopic resection is likely to lead to improved outcomes.

The criteria in our paper that were used to define patients suitable for laparoscopic liver resection were suggested by leading liver surgeons around the world. These criteria were further refined with the help of Nick O'Rourke and Rob Padbury, after the paper was presented at the ANZ HPB meeting in Coolum,

Australia in 2008. As with any new and evolving technique, these indications will be extended with time. The valid conclusion of our study is that the outcomes of surgery, be it laparoscopic or open, can only be compared contemporaneously and not with historical data.

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